

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00486845 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Chapman Cubine Adams + Hussey [MEMO ITEM]		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 14 / 2014</div> </div>	
Mailing Address 1600 Wilson Blvd Ste 300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">170.00</div>	
City Arlington	State VA		
Purpose of Expenditure ESTIMATE: Design		Category/ Type	Transaction ID : E6FFB241DCC1F48CEAE1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1892.28</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 14 / 2014</div> </div>	
Mailing Address 1920 L St NW Ste 800		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div>	
City Washington	State DC		
Purpose of Expenditure ESTIMATE: Staff Time for Mail Copy		Category/ Type	Transaction ID : E76DA77C3D3FD4992A7E Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1892.28</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
[Electronically Filed]

Date

MM / DD / YYYY
10 / 19 / 2014

Signature

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(Schedule E)

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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 150.00	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : EC53254736EF845459D6
Purpose of Expenditure ESTIMATE: Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Mosaic [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 1920 L St NW Street Level		Amount 80.00	
City Washington	State DC	Zip Code 20036-5004	Transaction ID : E5998872894004523B8C
Purpose of Expenditure ESTIMATE: Printing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Sir Speedy [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 2001 L St NW		Amount 220.00	
City Washington	State DC	Zip Code 20036-4905	Transaction ID : E4F8EEE0D588E4D5D8C6
Purpose of Expenditure ESTIMATE: Printing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freestone Communications [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2014	
Mailing Address 3104 Lowell Blvd		Amount 320000.00	
City Denver	State CO	Zip Code 80211-3639	Transaction ID : E55B49BE2FA1846799E8
Purpose of Expenditure ESTIMATE: Phone Calls	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	195.00

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